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Kenneth L Koh Kohn & Associat 3050 Northweste		Certificate of Mailing or Transmission. I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
Suite 410					Margaret Dwyer			(Depositor's name)
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					09/24/201	0		(Date)
APPLICATION NO.	APPLICATION NO. FILING DATE			FIRST NAMED INVENT	RST NAMED INVENTOR		EY DOCKET NO.	CONFIRMATION NO.
10/593,413	93,413 09/18/2006			Hyo-Joon Kim	0220.0		20.00002	1247
TITLE OF INVENTION THE SAME	: ANTI-OBESE IMMU	NOGE	NIC HYBRID PO	OLYPEPTIDES AND A	ANTI-OBESE VAC	CCINE COM	IPOSITION COMI	
APPLN. TYPE	SMALL ENTITY	ISSI	UE FEE DUE	PUBLICATION FEE DU		UE FEE T	OTAL FEE(S) DUE	DATE DUE
nonprovisional	nonprovisional YES		\$755	\$300	\$0		\$1055	09/24/2010
EXAMINER		ART UNIT		CLASS-SUBCLASS				
PENG, BO 1648			1648	435-006000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondenc Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required. 				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AT	ND RESIDENCE DATA	A TO BE	E PRINTED ON	THE PATENT (print or data will appear on the	type) e natent. If an assig	mec is iden	tified below, the do	ocument has been filed for
recordation as set forth	n in 37 CFR 3.11. Comp	oletion o	f this form is NO	I a substitute for filing	an assignment.			
(A) NAME OF ASSIC			(B) RESIDENCE: (CITY and STATE OR COUNTRY) Ansan-si, Gyeonggi-do, KOREA					
SJ Biomed,	Inc.			Ansan-si,	gyeonggi-do	, KUKEA	L	
Please check the appropri	iate assignee category or	categor						up entity Government
4a. The following fee(s) are submitted: ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies				Ab. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 11-1449 (enclose an extra copy of this form).				
5. Change in Entity Stat	s SMALL ENTITY stati	us. See 3	7 CFR 1.27.	☐ b. Applicant is no				
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Authorized Signature	/Kenneth I.	/	******	Date	9/23/10)		
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